



STATE OF WASHINGTON  
WASHINGTON STATE BOARD OF HEALTH  
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Olympia, Washington 98504-7990

January 27, 2002

The Honorable Eileen Cody, Chair  
House Health Care Committee  
John L O'Brien Building  
2nd Floor, Room 245-A  
Olympia, Washington 98504-0600

Dear Representative Cody,

I am writing as a member of the State Board of Health to discuss House Concurrent Resolution 4422. I agree that it is critical that the state address health care workforce shortages, and I support the establishment of a Health Care Work Force Commission. I am particularly pleased to see that the strategic plan produced by the commission would, "Recommend ways to increase the diversity of the health professions."

In 2001, the Board issued a report on health disparities that documented that the state's minority and ethnic populations suffer a disproportionate burden of disease. A growing body of research shows that one of the ways to reduce health disparities is to make sure the health care workforce reflects the diversity of the population it serves. We know, for example, that minority providers are more likely to provide care to underserved communities. And, in the same way that female health providers have increased the quality, accessibility, and responsiveness of our health care system for women and girls, health care providers who share a common language and/or racial and ethnic background with their patients are likely, studies show, to improve quality, accessibility, and responsiveness for those patients. People of color represent a growing proportion of the population of Washington, yet they are seriously underrepresented in the state's health care workforce and underserved by its health care delivery system.

The Board believes that health care workforce shortages cannot be solved without explicitly addressing diversity as a priority. We have an opportunity to treat two disorders with a single intervention. As the Washington State Hospital Association report *Who Will Care for You?* points out, bringing new people into the health professions will require new recruitment efforts aimed at subpopulations that traditionally have not been major sources of health professionals, including growing minority populations. At the same time, health care workers that come from racial and ethnic minority communities are most likely to provide effective care to many of the state's underserved communities and to the subpopulations that suffer the most serious disease burden.

I believe that for the commission to be most successful, it must give make diversity one of its priorities. To this end, I suggest two specific changes to HCR 4462:

- First, I would insert a fourth “whereas” that addresses diversity. It might read, “WHEREAS, The population of our state is becoming increasingly diverse and the state’s racial and ethnic minority groups are underrepresented in our health care workforce and underserved by our health care system.”
- Second, because of the Board’s leadership and continuing commitment in this area, I would recommend that a representative of the Washington State Board of Health be part the commission.

Including these changes in the resolution this committee reports to the full house would send a strong message that you want to see diversity be a prominent goal of health care workforce development. Thank you for considering these suggestions and for your commitment to addressing this important public health issue.

Sincerely,

Vickie Ybarra, RN, MPH  
Committee on Health Disparities  
Washington State Board of Health

cc: Members, House Health Care Committee  
Members, Senate Health & Long-Term Care Committee  
Members, Washington State Board of Health  
Don Sloma, Washington State Board of Health  
Patty Hayes, Department of Health  
Ree Sailors, Executive Policy Division